

I am pleased to present this brochure highlighting the *2003–2007 State Aging Services Plan*. Consistent with state law and the Older Americans Act, the Division of Aging has produced this plan to guide our response to the challenges and opportunities of an aging society. Many individuals and groups helped provide information and ideas on healthy aging, long-term care, economic security, and the development of senior-friendly communities. I hope you will review the full plan on the web at www.dhhs.state.nc.us/aging/plan.htm.

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Secretary,
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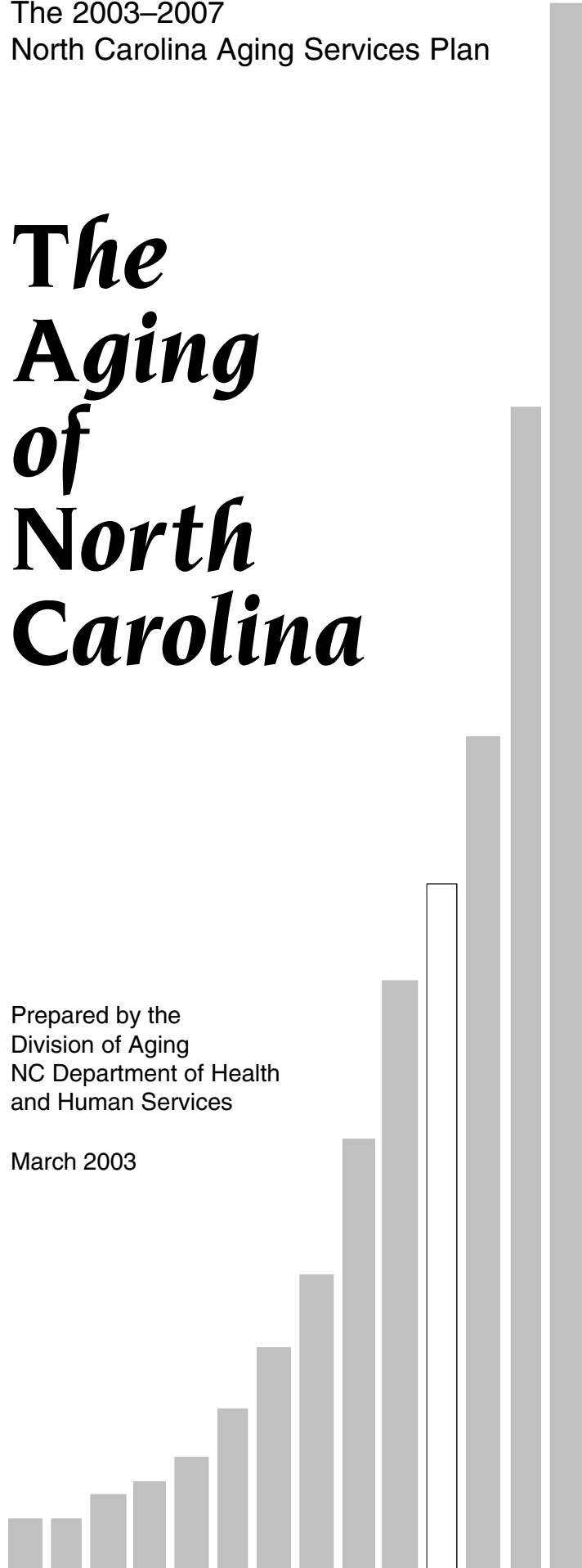
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The 2003–2007
North Carolina Aging Services Plan

The Aging of North Carolina

Prepared by the
Division of Aging
NC Department of Health
and Human Services

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Priorities for North Carolina's Older Adults

After a brief review of the demographics of North Carolina's older population, the *2003–2007 Plan* addresses essential dimensions of well-being for older adults—health, wealth, and social engagement, and discusses the state's interest in creating senior-friendly communities. Here are some of the *Plan's* principal goals.

Healthy Aging

- ✓ Expand collaborative activities to meet the NC 2010 Health Objectives for seniors.
- ✓ Address health disparities among seniors.
- ✓ Expand medication management assistance.
- ✓ Improve access to dental and mental health care.
- ✓ Increase immunization rates for influenza and pneumonia.
- ✓ Promote end-of-life care.

Long-term Care and Aging

- ✓ Increase access to home and community care.
- ✓ Strengthen the direct care work force, model consumer-directed care, and help residents in facilities return home when possible.
- ✓ Support family caregivers.
- ✓ Promote local planning to reform long-term care.
- ✓ Strengthen Adult Protective Services and guardianship programs.

Economic Security

- ✓ Build a comprehensive approach to address issues affecting the economic security of seniors.
- ✓ Maximize use of available funds for CAP/DA, the Senior Care drug assistance program, and other services.
- ✓ Strengthen education of the public about Medicare, Medicaid, and the importance of personal planning.

Aging North Carolina

	NC	US
Total population in 2000 ^a	8 million	281 million
65+ population (%) ^a	12.0	12.4
65+ women (%) ^a	59.8	58.9
65+ African Americans (%) ^a	15.9	8.3
65+ Latinos (%) ^a	0.6	4.7
Life expectancy at 60 (years) ^b	20.8	21.6
65+ employed (%) ^a	13.2	12.5
65+ below poverty (%) ^a	13.2	9.9
65+ below 200% of poverty (%) ^a	36.4	31.4
Rural population (% of all ages) ^a	39.8	21.0

^a Census 2000, Summary File 3 (SF3)

^b NCDPH 2002, *Healthy life expectancy in North Carolina, 1996–2000*.

Senior-Friendly Communities

A senior-friendly community offers a wide range of social and economic opportunities and support for all citizens, including seniors; values seniors' contributions to the community; promotes positive intergenerational relations; considers the needs and interests of seniors in physical and community planning; respects and supports seniors' desires and efforts to live independently; and, acknowledging the primary role that families, friends, and neighbors play in the lives of older adults, enhances their capacity for caring.

- ✓ Develop a blueprint for designing senior-friendly communities.
- ✓ Strengthen senior centers.
- ✓ Promote volunteerism.
- ✓ Establish a statewide system for information and assistance (I&A).
- ✓ Educate seniors and families about consumer fraud.
- ✓ Strengthen transportation and housing for seniors.

Major Accomplishments (1999–2003)

Since the last plan, North Carolina has

- ✓ Expanded Medicaid coverage to include seniors (65 and older) with incomes below 100 percent of poverty.
- ✓ Created the Senior Care program to expand prescription drug assistance to seniors with low incomes.
- ✓ Developed a Long-term Care Plan for Older and Disabled Adults and secured a federal “Real Choice” grant to help implement this plan.
- ✓ Started the NC Family Caregiver Support Program under the Older Americans Act.
- ✓ Increased the Homestead Property Tax Exemption for low-income seniors and disabled persons.
- ✓ Increased funding for transportation including the Elderly and Disabled Transportation Assistance Program (EDTAP).
- ✓ Established a state tax credit for purchase of long-term care insurance.
- ✓ Strengthened oversight of adult care homes.
- ✓ Established measurable targets for seniors in the NC 2010 Health Objectives.
- ✓ Started the voluntary Senior Center Certification process and the Ann Johnson Institute for Senior Center Management.
- ✓ Formed the NC End-of-Life-Care Coalition.
- ✓ Expanded the Senior Education Corps linking senior volunteers with school children in 82 counties.
- ✓ Moved toward a statewide information and assistance (I&A) system.

Charting the Course

North Carolina is only a few years away from a significant demographic change as the baby boomers (those born between 1946 and 1964) approach retirement age in the latter part of this decade. The time to chart an effective course for an aging North Carolina is growing short. The graph on the cover shows the growth of North Carolina’s population age 65 and older for census years 1900 to 2000 and projections for 2010, 2020, and 2030, when all of the boomers will have reached that age.

Projected 65+ Population in NC		
Year	Number	Percent
2000	969,048	12.0
2010	1,183,243	12.5
2020	1,652,288	15.1
2030	2,221,470	17.9

Source: NC State Data Center

Five Major Themes

The *2003–2007 NC Aging Services Plan* focuses on five major themes.

1. Draw upon the talents and resources of active seniors

North Carolina is very much a part of the world-wide longevity revolution. Babies born today in North Carolina are expected, on average, to live to the age of 75.6 years. This is an impressive gain compared to the life expectancy of 49.2 years a century earlier. Not only are older adults living longer, they are living better. A landmark study reports that disability rates among seniors have steadily dropped in the past two decades. Many seniors make good use of these added years by contributing to the community as paid workers, volunteers, family caregivers, and community leaders. We must continue promoting wellness among seniors, enabling them to remain active.

2. Enhance services for vulnerable older adults

While many seniors are healthy, engaged, and living in comfortable circumstances, others face declining health, poverty, and social isolation. As of the 2000 Census

- ✓ More than 298,200 community-dwelling seniors in NC reported some level of physical disability and nearly 121,900 a mental disability.
- ✓ Over 337,000 lived in or near the poverty level, as of 1999.

- ✓ Nearly half of NC’s seniors live in rural areas, facing a long list of challenges—isolation by distance, lagging infrastructure, sparse resources, and weak economic competitiveness.

The public and private sectors share responsibility for helping vulnerable seniors and their families.

3. Value diversity while addressing disparity

North Carolina is rich in diversity, but some of its citizens are at risk due to the disparity that exists among all populations, including seniors:

- ✓ African Americans and members of other minority groups have a lower life expectancy at birth than Whites—72.1 years, compared to 76.8.
- ✓ African American seniors have a higher poverty rate than White seniors, 28.1 percent, compared to 10.2 percent.
- ✓ Women age 65 and older are almost twice as likely to be poor than men are (16.2 percent, compared to 8.9 percent).
- ✓ The coastal plains region of North Carolina, labeled by some as the *Buckle of the Stroke Belt*, has the fourth highest stroke death rate in the nation.

North Carolina cannot afford to let its diversity translate into disparity that threatens the well-being of seniors and their families.

4. Maximize formal and informal resources

Because the state’s budget will likely be constrained for the next few years, we must be especially good stewards of available public resources, set priorities, and reach out to all sectors to assist in addressing the needs of vulnerable seniors and their families. For SFY 2003–2004 the following priorities were identified by three or more of these major aging advocacy groups—the Senior Tar Heel Legislature, the Governor’s Advisory Council on Aging, the NC Study Commission on Aging, and the NC Coalition on Aging.

- ✓ Maintain the Community Alternatives Program for Disabled Adults (CAP/DA) as a viable service.
- ✓ Assure implementation of national criminal background checks for employees of long-term care facilities.
- ✓ Maintain support of the Home and Community Care Block Grant.
- ✓ Continue improving access to prescription drugs for older adults with low and moderate incomes.
- ✓ Make permanent the state income tax credit for long-term care insurance premiums.

5. Assist baby boomers to prepare for the future

Many of the oldest baby boomers will retire in this decade. Here are some milestones. Beginning in

- 2006** boomers born in 1946 will be eligible to receive services under the Older Americans Act
- 2008** they can draw Social Security at a reduced rate
- 2011** they can receive Medicare benefits and Medicaid assistance
- 2012** they start drawing full Social Security at age 66, because of the phased increase in age of eligibility.

Baby boomers are concerned about the long-term solvency of Social Security, changing pension programs, age discrimination, and rising health and long-term care costs. How well boomers do in their senior years will affect North Carolina’s future.

Challenges Ahead

- ✓ One-third of older North Carolinians are considered poor or near poor.
- ✓ Rising health and long-term care costs are major threats to economic security.
- ✓ The well-being of seniors varies greatly by race, class, and other factors.
- ✓ Many seniors and baby boomers lack knowledge and skills to plan and manage a secure retirement.
- ✓ Healthy aging requires a commitment from individuals, government, and society.

The *2003–2007 Aging Services Plan* is available on the NC Division of Aging’s website:
<http://www.dhhs.state.nc.us/aging/home.htm>.